# Exhibit A

Union. Ask your postmaster and see the International Mail Manual for limitations of coverage and individual country prohibitions and restrictions.

How to File a Claim: You must file domestic claims within one year of the date the article was mailed. International indemnity claims for loss must be filed within six months of the date the article was malled. Make sclaims for complete or partial loss of contents, damage, or alleged rifling immediately. For complete or partial loss or damage present (1) this receipt, (2) the article, container, and packaging; and, (3) evidence to substantiate your claim. HER YORK HI 1900G

Please allow three months after you file to inquire about the status of your claim.

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RB858314591US

Declaration of Value: You must declare the foll value of all Registered articles at the time of mailing. Nith Postal histrance: You can purchase postal insurance against loss or damage by paying the appropriate fee. 60, 02

Receipt for Registered Mail

Without Fostal Insurance: You can also send an article by Registered Mail With Sulfation asing postal insurance. No indervality is paid for unin-sured articles

## Indemnity Coverage:

PS Form 3806.

Registered No.

Case 1:05-cv-00327-GMS

Domestic - Indemnity coverage for domestic Registered Mail is limited to the lesser of (1) the declared value of the article at the time of mailing if Registered Mail lost or totally damaged, or (2) the cost of repairs Ask your postmaster for additional information about insurance limits and coverage. See Domestic Mail Manual S010 and S911 for limitations of coverage.

International - Indemnity coverage for international Registered Mail is limited to the maximum set by the Convention of the Universal Postal Union. Ask your postmaster and see the International Mail Manual for limitations of coverage and individual country prohibitions and restrictions.

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Please allow three months after you file to inquire about the status of your claim.

(Customer

June

receipt for

Document 25-2 ReFiled\$08/4787/2 Handling Return \$0.00 \$1.75 Charge Receipt Postage Restricted \$ \$3.85 \$0.00 Delivery Received by \$25,000 is inc International Indemnity With Postal Insurance Customer Must Declare is limited. Full Value \$ (See Reverse). Without Postal Insurance (Please Print)
All Entries Must Be in Ballpoint or Typed To Be Completed By Customer FROM PS Form 3806. Receipt for Régistered Mail June 2002 (See Info

Declaration of Value: You must declare the full value of all Registered

With Rosal Insurance: You can purchase postal insurance against loss of damage by paying the appropriate feetings

Without Postal/Insurance: You can also send an article by Registered Markwittigut Burchasing) postal insurance. No interinity is paid for uninsured atticles:

### Indemnity Coverage:

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Case 1:05-cv-00327-GMS

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Please allow three months after you file to inquire about the status of your claim.

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	T OF	125 BROAD STREET  AND GORK NY JOHN NY JOHN NY JOHN STREET	\$25,000 international Indemnity is Limited (See Reverse)  LLS UP  VALE  7899  Van 4 Conwell U  270004

Declaration of Value: You must declare பிரி விக்கி all registered mail articles at the time of mailing, whether you want to purchase insurance or nekel

With Posta-insurance against loss or damage by paying the appropriate tee.

Wរីម៉ែលីខេត្ត Insurance from can also send and include by registered mall without purchasing postal insurance. No indemnity is paid for uninsured articles.

## Indemnity Coverage:

Domestic - Indemnity coverage for domestic registered mail is limited to the lesser of (1) the value of the article at the time of mailing if lost or totally damaged, or (2) the cost of repairs. Ask your postmaster for additional information about insurance limits and coverage. See *Domestic Mail Manual* S010 and S911 for limitations of coverage.

International - Indemnity coverage for international registered mail is limited to the maximum set by the Convention of the Universal Postal Union. Ask your postmaster and see the International Mail Manual for limitations of coverage and individual country prohibitions and restrictions.

How to File a Claim: You must file domestic claims within one year of the date the article was mailed. Effective January 1, 2001, international indemnity claims for loss must be filed within six months of the date the article was mailed. Make claims for complete or partial loss of contents, damage, or alleged rifling immediately. For complete or partial loss or damage present (1) this receipt, (2) the article, container, and packaging; and, (3) evidence to substantiate your claims.

Please do not inquire about the status of your claim for at least 3 months after you file.

rm 3806, June 2000, (Customer Copy - Reverse)

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case 1:05-cv-00327-GMS	Document 25-2	Handling \$ \$0.00   Return \$ \$1.75   27   27   28   27   28   27   28   28
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Declaration of Value: You must declare the full value of all Registered Mail articles at the time of mailing.

With Postal Insurance: You can purchase postal insurance against

Without Postal Insurance: You can also send an article by Registered Mail Without Postal Insurance. No indepentity is paid for uninsured articles.

Indemnity Coverage:

Domestic - Indemnity coverage for domestic Registered Mail is limited to the lesser of (1) the declared value of the article at the time of mailing if lost or totally damaged, or (2) the cost of repairs Ask your postmaster for additional information about insurance limits and coverage. See Domestic Mail Manual S010 and S911 for limitations of coverage.

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Please allow three months after you file to inquire about the status of your claim.

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Case 1:05-cv-00327-GMS	Document 25-2	Received by   Received   Received by   Received   Rec	24 0501 27 07/28/2005 Damestic insurance up to \$25,000 is included in the fee.
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Domestic Mail Manual S010 and S911 for limitations of coverage. renaint for Benieter

International - Indemnity coverage for International Registered Mail is limited to the maximum set by the Convention of the Universal Postal Union. Ask your postmaster and see the *International Mail Manual* for limitations of coverage and individual country prohibitions and restrictions.

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Please allow three months after you file to inquire about the status of your claim.

substantiate your claim.

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receipt, (2) the article, container, and packaging; and, (3) evidence to

Please allow three months after you file to inquire about the status of

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	Mail Wiss Mare Ind. Dor the straight of the lost for Dor Intelliging House PS Form 3806, June 2002, (Customer Copy - Reverse)	claration of Value: You must declare the the converge of all Registered larticles at the time of mailing.  In Postal Insurance: You can purchase postal insurance against or damage by paying the appropriate fee. (1), (1) thout Postal Insurance: You can also send an article by Registered (1) Whithout Purchasing postal insurance. No infermity is paid for unineraticles.  The converge:  The converge of the article at the time of mailing if or totally damaged, or (2) the cost of repaint Ask your postmaster additional information about insurance limits and coverage. See mestic Mail Manual S010 and S911 for limitations of coverage.  The converge of international Registered Mail is ted to the maximum set by the Convention of the Universal Postal on. Ask your postmaster and see the International Mail Manual for itations of coverage and individual country prohibitions and restrictions. The convention of the Universal Postal on. Ask your postmaster and see the International Mail Manual for itations of coverage and individual country prohibitions and restrictions. The convention of the Universal Postal on. Ask your postmaster and see the International Mail Manual for itations of coverage and individual country prohibitions and restrictions. The convention of the Universal Postal on. Ask your postmaster and see the International Mail Manual for itations of coverage and individual country prohibitions and restrictions. The convention of the Universal Postal on. Ask your postmaster and see the International Mail Manual for itations of coverage and individual country prohibitions and restrictions. The convention of the Universal Postal on. Ask your postmaster and see the International Mail Manual for itations of coverage and individual country prohibitions and restrictions. The convention of the Universal Postal on. Ask your postmaster and see the International Mail Manual for itations of coverage. See the International Mail Manual for itations of coverage of international mail Manual for itations of coverage. See the Internati

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All Entries Must Be in Ballpoint or Typed To Be Completed By Customer PS Form 3806, Receipt for Registered Mail June 2002

Declaration of Value: You must declare the Authorities of all Registered Mail articles at the time of mailing.

With Postal Insurance: You can purchase postal insurance against loss or damage by paying the appropriate fee. 99, 93

Without Postal Insurance: You can also send an article by Registered MadWilhout purchasing ชื่อรัฟ insurance. No indennity is paid for uninsured articles.

## Indemnity Coverage:

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Form 3806,

June

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Case 1:05-cv-00327-GMS

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Please allow three months after you file to inquire about the status of your claim.

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	June 2002, (Customer Copy - Reverse)	125 Broad Street  125 Broad Street  13806, Receipt for Registered Ma	International Indemnity is limited. (See Reverse).  21115 LLP  ARE  1989

Please allow three months after you file to inquire about the status of your claim.

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With Postal Insurance: You can purchase postal insurance against loss or damage by paying the appropriate fee. [4] 12

Without Postal Insurance: You can also send an article by Registered Mail Without purchasing postal insurance. No indemnity is paid for uninsured articles. 14 7

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Please allow three months after you file to inquire about the status of your claim.

Form (Customer Copy -

## Exhibit B

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Case 1:05-cv-00327-Complete items 1, 2, and 3. Also complete A. Signature ☐ Agent item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse □ Addresse so that we can return the card to you. B. Received by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from Item 1? ☐ Yes 1. Article Addressed to: If YES, enter delivery address below: Charles C. Krulak clo Rick Pepperman Sulluan + Comwellup 3. Service Type 125 Broad Street ☐ Certified Mall ☐ Express Mall Registered ☐ Return Receipt for Merchandis Now York, NY 1000L Insured Mail ☐ C.O.D. Restricted Delivery? (Extra Fee) ☐ Yes 2. Articl (Trans PS Forr 2595-02-M-154 UNITED STATES POSTAL SERVICE First-Class Mail Postage & Fees Paid USPS Permit No. G-10 Sender: Please print your name, address, and ZIP+4 in this box Chimicles + Tikellis LLP ONE Rodney SOWARE P.D. BOX 1035 WILMINGTON DE 19899 BOOS i

SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY Case 1:05-cv-00327-Gwis Document 23-Z and 3. Also complete items 1, 2, and 3. Also complete ZUUD Page item 4 if Restricted Delivery is desired. ☐ Agent Print your name and address on the reverse □ Addresse so that we can return the card to you. B. Received by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: If YES, enter delivery address below: Michael 6. Rhodes Clo Rick Pepperman Sullivant Cromwell LLP 3. Service Type 125 Broad Street ☐ Certified Mail ☐ Exoress Mail ☐ Return Receipt for Merchandise Registered new York, NY 10004 ☐ Insured Mall □ C.O.D. Restricted Delivery? (Extra Fee) ☐ Yes 2. Artic (Trai PS For 02595-02-M-154 UNITED STATES POSTAL SERVICE First-Class Mail Postage & Fees Paid Permit No. G-10 Sender: Please print your name, address, and ZIP+4 in this box Chimicles + Tikellis WP ONE Rodney Schale P.O. Box 1035 WILMINGTON, DE 19899 8003

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Case 1:05-cv-00327-0 Complete items 1, 2, and 3. Also complete Signature ☐ Agent item 4 if Restricted Delivery is desired. Print your name and address on the reverse □ Addresse so that we can return the card to you. C. Date of Deliver B. Received by (Printed Name) Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: If YES, enter delivery address below: John W. Schefler Clo Rick Reppermen Sullivan & cromwell UP 125 Broad Street 3. Service Type ☐ Certified Mail ■ Express Mail -El Registered Return Receipt for Merchandis New York, NY 10004 Insured Mall ☐ C.O.D. Restricted Delivery? (Extra Fee) ☐ Yes (Tran: PS For 12595-02-M-154 United States Postal Service First-Class Mail Postage & Fees Paid USPS Permit No. G-10 Sender: Please print your name, address, and ZIP+4 in this box Chimicles + TIKEILIS ULP ONE Rodney SONARE P.O. BOX 1035 WILMINGTON DE 19899 EOOB

* Case 1:05-cv-00327	SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:  James H. Benck  Clo Rick Peppermen  Sullian & Cromwell after 125 Broad Street	A. Signature  A. Signature  A. Signature  C. Date of Deliver  D. Is delivery address different from item 1? Yes  If YES, enter delivery address below:
	New York, NY 1000- 2. Artic (Tray	3. Service Type  Certified Mail
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SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete items 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mallpiece, or on the front if space permits.  1. Article Addressed to:  Benjamin R. Civil etti  Clo Rick Repperment  Sullivan & Cromwell We 125 Broad Smeet  Now York, NY 1mml	COMPLETE THIS SECTION ON DELIVERY  Agent Addresse B. Received by (Printed Name) C. Date of Deliver  D. Is delivery address different from item 1? Yes If YES, enter delivery address below:  3. Service Type Certified Mail Return Receipt for Merchandls Insured Mail C.O.D.  4. Restricted Delivery? (Extra Fee) Yes
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United States Postal Service	First-Class Mail Postage & Fees Paid USPS Permit No. G-10
Chimides + T DNE Rooney P.O. Box 1035 WILMINGTON,	e, address, and ZIP+4 in this box • TKells UP SowkE  DE 19899

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Case 1:05-cv-00327-0 Complete items 1, 2, and 3, Also complete A. Siensture ☐ Agent item 4 if Restricted Delivery is desired. X ☐ Addresse Print your name and address on the reverse so that we can return the card to you. C. Date of Deliver B. Received by (Printed Name) Attach this card to the back of the mailpiece. or on the front if space permits. D. Is delivery address different from item 1? ☐ Yes 1. Article Addressed to: If YES, enter delivery address below: WILLIAM L. Jews clo Rick Pepperman Sullivan & Cronwell UP 125 Broad Street New York, my 10004 3. Service Type ☐ Certified Mail ☐ Express Mall Registered ☐ Return Receipt for Merchandis ☐ Insured Mall ☐ C.O.D. ☐ Yes 2. Artic (Tran PS For )2595-02-M-15-United States Postal Service First-Class Mail Postage & Fees Paid USPS Permit No. G-10 Sender: Please print your name, address, and ZIP+4 in this box Chimicles + Tikellis Lif ONE Rodincy Source P.O. BOX 1035 WILMINGTON DE 19899 ECOS

04.0500007.6	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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Page 22

First-Class Mail Postage & Fees Paid USPS Permit No. G-10

Sender: Please print your name, address, and ZiP+4 in this box

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STUART L. MARKOWITZ  Clo Rick Pepperman  SULLIVAN + Cromwell LLP  125 Broad Street  New York, NY 10004	3. Service Type  Certified Mail Express Ma Registered Return Reco	il elpt for Merchandi
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COMPLETE THIS SECTION ON DELIVERY **SENDER: COMPLETE THIS SECTION** Case 1:05-cv-00327-Givis Document 1, 2, and 3. Also complete A Signature item 4 if Restricted Delivery is desired. □ Agent ☐ Addresse Print your name and address on the reverse so that we can return the card to you. B. Received by ( Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. ☐ Yes D. Is delivery address different from item 1? 1. Article Addressed to: If YES, enter delivery address below: Laura S. Unger Clo Rick Pepperman Sullivan & Cromwell LLP 3. Service Type ☐ Certified Mail ☐ Express Mail 125 Broad Street Registered ☐ Return Receipt for Merchandis New York, NY 10004 ☐ insured Mall □ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes 2. Artic (Trai PS Fo: 02595-02-M-15-UNITED STATES POSTAL SERVICE First-Class Mail Postage & Fees Paid USPS Permit No. G-10 Sender: Please print your name, address, and ZIP+4 in this box Chimicles & Tikellis UP ONE Rodney Sovare P.D. Box 1035 WILMINGTON, DE 19799 **EDDB** 

	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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	1. Article Addressed to: Thomas G. Murdough Clo Rick Papperman	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No
	Sullivant Cromwell LLP 125 Broad Street New York, NY 10004	☐ Certified Mall ☐ Express Mall ☐ Registered ☐ Return Receipt for Merchandis ☐ Insured Mail ☐ C.O.D.
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